Wisconsin Department of Revenue PO Box 8902 Madison WI 53708-8902 (608) 266-2776, ext. 16435

# Cigarette and/or Tobacco Products Salesperson's Permit Application

DEPARTMENT USE ONLY				
Permittee Number				
Period Covered				
Date of Issuance				



The undersigned hereby makes application for a permit to sell cigarettes and/or tobacco products, solicit orders for, or engage in the sale for future delivery for a specific employer. When employment changes, the current permit must be returned to this department before a new permit can be issued. Enclose a \$20 Business Tax Registration Fee (if applicable). Read the instructions on the reverse side.

Last Name (please print) First	M.I. Phone	Number	Date of Birth		
	( )			1 1	
Address Social Security Number (require					
City	State			Zip Code	
Business or Occupation for the Past Three Years					
2. Current Business or Occupation (be specific)					
Yes No 3. Have you as a sole Proprietor, Partner(s), Lin hold a permit or certificate issued by the Wis If Yes, indicate:  a) type of permit or cert b) permit or certificate r c) location for which it v	consin Department ificate umber	of Revenue?	· 	.,	
Yes No 4. Have you been found guilty of crimes relating issued pursuant to Chapter 125 of the Wisco		or anything of valu	ie to perso	ons holding licenses or permit	
Yes No 5. Have you been convicted of violating federal If Yes, check type of law violated: For Also indicate details of the violation, including 6. If you have been convicted of a felony for which you received a pard	ederal S	tate	al Ordinan rt and disp	ces position.	
7. Check the box(es) below which apply:  Application for permit to solicit sales for future delivery of CIGAL  Application for permit to solicit sales for future delivery of TOBA		(OTP)			
8. Name of the permittee which applicant will represent.			Permit Number (prefix(es) and number)		
Address	City		State	Zip Code	
I declare under penalties of the law that I have examined this correct and complete.	_ information and	to the best of m	y knowle	edge and belief, it is true,	
APPLICANT SIGN HERE			Date		

# Instructions for Cigarette and/or Tobacco Products Salesperson's Permit Application

## 1. Who Needs A Cigarette and/or Tobacco Products Salesperson's Permit

Cigarette Salesperson – Any person *in Wisconsin* who solicits orders for or engages in the sale of cigarettes for future delivery must obtain a salesperson's permit for cigarette. A permit is not needed if you will be only soliciting orders by correspondence or phone from outside Wisconsin.

Tobacco Products Salesperson – Any person in Wisconsin who solicits orders for or engages in the sale of tobacco products for future delivery must obtain a salesperson's permit for tobacco products. A Salesperson's Permit must be obtained by each person who will be soliciting orders in Wisconsin. A permit is not needed if you solicit order by correspondence or by phone outside Wisconsin.

NOTE: No person may solicit on-the-spot sales (peddling) of cigarettes or tobacco products in Wisconsin. Violators are subject to the enforcement provisions allowed under Wisconsin Statutes. Product sold in violation of the statute is unlawful property and subject to seizure.

#### 2. How to Obtain a Cigarette and/or Tobacco Products Salesperson's Permit

Send your completed application to Wisconsin Department of Revenue along with your \$20 BTR fee if applicable (see 3 below).

Mail To: Wisconsin Department of Revenue

PO Box 8902

Madison, WI 53708-8902

### 3. Business Tax Registration Fee (BTR Fee)

A \$20 BTR fee applies to all persons who apply for a Cigarette and/or Tobacco Products Salesperson's Permit with the exceptions explained below.

Exceptions – The \$20 BTR fee is not due with this application if:

- a. You held any active permits or certificates on December 31, 1995, issued by the department that is covered by the BTR provisions.
- b. You paid the \$20 BTR fee with a previous application for another permit or certificate which the department issued.

#### 4. Assistance and Forms

Information, additional forms and assistance are available at our following office:

2135 Rimrock Road or write to: PO Box 8902

Madison, WI 53713 Madison, WI 53708-8902

Telephone (608) 266-2776, ext. 16435